

		<b>Personal Financial Statement</b>		WisDOT - 8/26/03	
<b>Wisconsin Unified Certification Program</b>				As of _____, _____	
Complete this form for: (1) each proprietor, or (2) each limited partner, each general partner, (3) each stockholder, or (4) any person or entity upon which their status is depended on achieve the status of "Disadvantaged".					
Business Name					
Disadvantaged Owner's Name				Business Phone	
Residence Address				Residence Phone	
City, State & Zip Code					
<b>ASSETS</b>			<b>LIABILITIES</b>		
Cash on hand & in Banks	\$	Accounts Payable	\$		
Savings Account	\$	Notes Payable to Banks and Others	\$		
IRA or Other Retirement Account	\$	(Describe in Section 2)			
Accounts & Notes Receivable	\$	Installment Account (Auto)	\$		
Life Insurance-Cash Surrender Value Only	\$	Mo. Payments	\$		
(Complete Section 8)		Installment Account ( Other)	\$		
Stocks and Bonds	\$	Mo. Payments	\$		
(Describe in Section 3)		Loan on Life Insurance	\$		
Real Estate	\$	Mortgages on Real Estate	\$		
(Describe in Section 4)		(Describe in Section 4)			
Automobile-Present Value	\$	Unpaid Taxes	\$		
Other Personal Property	\$	(Describe in Section 6)			
(Describe in Section 5)		Other Liabilities	\$		
Other Assets	\$	(Describe in Section 7)			
(Describe in Section 5)	\$	Total Liabilities	\$		
		Net Worth			
	<b>Total</b> \$		<b>Total</b> \$		
<b>Section 1. Source of Income</b>			<b>Contingent Liabilities</b>		
Salary	\$	As Endorser or Co-Maker	\$		
Net Investment Income	\$	Legal Claims & Judgments	\$		
Real Estate Income	\$	Provisions for Federal Income Tax	\$		
Other Income (Describe below)*	\$	Other Special Debt	\$		
	<b>Total</b> \$		<b>Total</b> \$		
Description of Other Income in Section 1.					
<b>Section 2. Notes Payable to Banks and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)</b>					
Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

**Section 3. Stocks and Bonds (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).**

Number of Shares	Name of Securities	Cost	Market Value Quotations/Exchange	Date of Quotation/Exchange	Total Value

**Section 4. Real Estate Owned** (List each parcel separately. Use attachment if necessary. Each attachment must be identified as part of this statement and signed.)

	Property A	Property B	Property C
Type of Property			
Address			
Date purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

**Section 5. Other Personal Property and Other Assets** (Describe, and if any is pledges as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

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**Section 6. Unpaid Taxes.** (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

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**Section 7. Other Liabilities.** Describe in Detail.)

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**Section 8. Life Insurance Held.** (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

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I authorize WisDOT to make inquiries as necessary to verify the accuracy of the statements made. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of verifying Economic Disadvantage or obtain certification as a Disadvantaged Enterprise. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature:		Date:	SSN Number:
Signature:		Date:	SSN Number: